

MULTIPLE DEPT. CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
01595341

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
6	1					
7		1				
8		1				
9		1				
10		1				
11	1					
12		1				
13	1					
14		1				
15	1					
16		1				
17	1					
18		1				
19		1				
20		0				
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50						
TOTAL IND.	5	↓		↓		↓
TOTAL DEP.	15	↑		↑		↑
TOTAL CLAIMS	20	████████		████████		████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.			↓			↓
TOTAL DEP.			↑			↑
TOTAL CLAIMS			████████			████████